RECEIVED UNIFORM LIMITED OFFERING EXEMPTION

Washington, D.C. 20549

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, **SECTION 4(6), AND/OR**

OMB APPROVAL OMB NUMBER: 3235-0076 Expires: January 31, 1988

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Name of Offering (check if this is an amendment and name has changed, and indicate change.) 1297063 Haidar Neptune Fund LLC Filing Under (Check box(es) that apply): Rule 504 ___ Rule 505 X Rule 506 Section 4(6) Type of Filing: New Filing Amendment A. BASIC IDENTIFICATION DATA 1. Enter the information requested about the issuer Name of Issuer (check if this is an amendment and name has changed, and indicate change.) Haidar Neptune Fund LLC Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) c/o Haidar Capital Management LLC, 415 Madison Avenue, 24th Floor, Nev 752-5147 (212) Address of Principal Business Operations mber and Street, City, State, Zip Code) Telephone Number (if different from Executive Offices) (Including Area Code) JUL 14 2004 Same Same Brief Description of Business HOMSON Securities Investment Type of Business Organization other (please specify): _ corporation limited partnership, already formed limited liability company limited partnership, to be formed business trust Month Actual Estimated Actual or Estimated Date of Incorporation or Organization: [1|1] [0|3] Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: [D][E]

GENERAL INSTRUCTIONS

FEDERAL:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

CN for Canada; FN for other foreign jurisdiction)

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendment needs only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the

Filing Fee: There is no federal filing fee.

STATE:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Each prom	oter of the issuer, if the	ne issuer has been organized with	nin the past five years;		
• Each benef	icial owner having the	e power to vote or dispose, or di	rect the vote or disposition of, 10%	% or more of a class of	equity securities of the issuer;
• Each execu	itive officer and direc	tor of corporate issuers and of co	orporate general and managing par	rtners of partnership iss	uers; and
Each gener	al and managing part	ner of partnership issuers.			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if	individual)			,	
Haidar, Said N.					
Business or Residence Addres	s (Number and Stree	et, City, State, Zip Code)			
c/o Haidar Capital Manageme	nt LLC, 415 Madison	Avenue, 24th Floor, New York,	NY 10017		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	Managing Member
Full Name (Last name first, if	individual)			,	
Haidar Capital Management L					······································
Business or Residence Addres					
415 Madison Avenue, 24th Flo		_ 	Executive Officer	Director	Administrative
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer		Member Member
Full Name (Last name first, if	individual)				
Haidar Capital Advisors LLC		. <u>. </u>			
Business or Residence Addres	s (Number and Stree	et, City, State, Zip Code)			
415 Madison Avenue, 24th Flo	or, New York, NY 1				
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if	individual)				
	0. 1. 10.	- C: C: 7: C: 13			
Business or Residence Address	s (Number and Stree	et, City, State, Zip Code)			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if	individual)				
Business or Residence Addres	Olymbra and Street	City State 7in Code)			
Business or Residence Addres	s (Number and Street	et, City, State, Zip Code)	•		* · · · · · · · · · · · · · · · · · · ·
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if	individual)				<u>~</u> _~
Business or Residence Addres	s (Number and Stree	et, City, State, Zip Code)			
•	(1 Jse	e blank sheet, or conv and use ad	ditional copies of this sheet, as ne	cessary.)	
	(030			# /	

A. BASIC IDENTIFICATION DATA

Enter the information requested for the following:

					B. II	NFORM	ATION	ABOUT	OFFER	RING				
1.	Has the i	ssuer sold	, or does the	e issuer inte	end to sell,	to non-accre	edited inves	stors in this	offering?					Yes No
					Answe	r also in Ap	pendix, Co	lumn 2, if f	iling under	ULOE.				
2.	What is t	he minim	um investm	ent that wil	l be accepte	ed from any	individual	?		.,	•••••		••••	\$100,000
														Yes No
3.	Does the offering permit joint ownership of a single unit?													
4.	solicitation dealer reg	on of pure gistered w	hasers in co	nnection w and/or with	rith sales of h a state or	securities i states, list t	n the offeri he name of	ng. If a per the broker	son to be lis or dealer. I	sted is an as f more than	sociated pe	erson or age	iilar remune nt of a brok listed are as NONE	er or
Full Nam	e (Last nan	ne first, if	individual)											
					·				<u> </u>					
Business	or Residen	ce Addres	s (Number :	and Street,	City, State,	, Zip Code)								
Name of	Associated	Broker or	Dealer								-			
States in	Which Pers	on Listed	Has Solicit	ed or Intend	ds to Solici	t Purchasers	S							
(Check '	'All States'	or check	individual	States)						• • • • • • • • • • • • • • • • • • • •				All States
	[AL] [IL]	[AK] [IN]	[AZ] [IA]	[AR] [KS]	[CA] [KY]	[CO] [LA]	[CT] [ME]	[DE] [MD]	[DC] [MA]	[FL] [MI]	[GA] [MN]	[HI] [MS]	[ID] [MO]	
	[MT] [RI]	[NE] -[SC]	[NV] [SD]	[NH] [TN]	[NJ] [TX]_	[NM] [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	[OH] [WV]	[OK] [WI]	[OR] [WY]	[PA] [PR]	
Full Nam	e (Last nan	ne first, if	individual)											
Duainaga	on Desiden	20 4 4	o (Niversham	and Change	City State	Zin Codo)								
Business	or Residen	ce Addres	s (Number :	ma Street,	Chy, State,	Zip Code)								
Name of	Associated	Broker or	Dealer											
States in	Which Pers	on Listed	Has Solicit	ed or Intend	ds to Solici	t Purchasers	<u> </u>							
(Check '	'All States'	or check	individual :	States)										All States
(211211	[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[HD]- [MO] [PA] [PR]	
Full Nam	e (Last nan	ne first, if	individual)				-							
Business	or Residen	ce Addres	s (Number a	and Street,	City, State,	Zip Code)								
Name of	Associated	Broker or	Dealer									·		
States in '	Which Pers	on Listed	Has Solicit	ed or Intend	ds to Solici	t Purchasers								
						6. 6.14061	•							A 11 Ctatas
(Uneck`	'All States' [AL] [IL] [MT]	or check [AK] [IN] [NE]	individual : [AZ] [IA] [NV]	States) [AR] [KS] [NH]	[CA] [KY] [NJ]	[CO] [LA] [NM]	[CT]- [ME] [NY]	[DE]- [MD] [NC]	{DC} {MA] [ND]	[FL] [MI] [OH]	[GA] [MN] [OK]	[HI] [MS] [OR]	[ID] [MO] [PA]	All States

[TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

			<u> </u>
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\sigma\) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt:	\$	\$
	Equity	\$	\$ \$
	☐ Common ☐ Preferred	Ψ	Ψ
	Convertible Securities (including warrants)	\$	\$ ⁻
	Partnership Interests	\$ \$	\$
	Limited Liability Company Interests	\$500,000,000	\$ 89,000
	Total*	\$500,000,000	\$ 89,000
	Answer also in Appendix, Column 3, if filing under ULOE.	φ <u>σσσ,σσσ,σσσ</u>	Ψ <u>σο,σσο</u>
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		Aggragata
	is none of zero.	Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	1	\$ 89,000
	Non-accredited Investors	N/A	\$N/A
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.		• • •
	Type of offering	Type of Security	Dollar Amount Sold
	Rule 505	Security	\$
	Regulation A		\$ \$
	Rule 504		\$ \$
	Total		\$
			ΨΨ
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$0
	Printing and Engraving Costs		\$0
	Legal Fees		\$ 25,000
	Accounting Fees.		\$ 30,000
	Engineering Fees		\$0
•	Sales Commissions (specify finders' fees separately)		\$0
	Other Expenses (identify) Miscellaneous (Blue Sky fees, duplicating, courier, etc.)		\$5,000
*	Total		\$ 60,000
This is a	a continuous offering. Consequently, the aggregate offering price could be greater or less tha	n this amount.	

	C. OFFERING PRICE, NUMBE	R OF INVESTORS, EXPENSES AND USE O	F PROCEEDS	
		offering price given in response to Part C - sponse to Part C - Question 4.a. This difference		\$499,940,000*
5.	an estimate and check the box to the left of the	e amount for any purpose is not known, furnish		\$\frac{15215101300}{15215101300}
- ,			Payments to Officers, Directors, & Affiliates	Payments To Others
	Salaries and fees		☐ \$	□\$
	Purchase of real estate		□\$	\$
	Purchase, rental or leasing and installation of	machinery and equipment	□\$	
	Construction or leasing of plant buildings and	facilities	□\$	□ \$
	Repayment of indebtedness Working capital Other (specify): to be used as described in (Securities of another issuer pursuant to a Confidential Offering Memorandum	□ \$ □ \$ □ \$ □ \$	□ \$ □ \$ □ \$_ ⊠\$499,940,000
			□ \$	<u> \$ </u>
			□ \$	⊠\$ <u>499,940,000</u>
	Total Payments Listed (column totals added).	······································	⊠ \$ <u>49</u>	9,940,000
		D. FEDERAL SIGNATURE		
follov	ssuer has duly caused this notice to be signed by ying signature constitutes an undertaking by the st of its staff, the information furnished by the iss	e issuer to furnish to the U.S. Securities and E	exchange Commis	ssion, upon written
ssuer	Print or Type)	Signature	Date	
Haida	r Neptune Fund LLC	Said N. Handan),,1	46.200Y
	of Signer (Print or Type)	Title of Signer (Print or Type)		70,000
Said 1	N. Haidar	Sole Principal of Haidar Capital Management l	LLC, Managing N	1ember

*See asterisked comment on p. 4

ATTENTION

Intentional misstatements or omissions of act constitute federal criminal violations. (See 18 U.S.C. 1001.)